

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number: <input type="text"/>		OR <input checked="" type="checkbox"/> Correspondence address below	
Name HARFMANU TECHNOLOGY INC			
Address 424 AMANDA DR			
City WEDDINGTON		State NC	ZIP 28104
Country USA	Telephone (704) 846-9313	Fax (704) 846-9313	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) WALTER RUDOLF		Family Name or Surname HARFMANU	
Inventor's Signature <i>Walter R. Rudolf</i>		Date Nov 24, 2003	
Residence: City WEDDINGTON	State NC	Country USA	Citizenship USA
Mailing Address 424 AMANDA DR			
City WEDDINGTON	State NC	ZIP 28104	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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Given Name (first and middle [if any]) WALTER RUDOLF		Family Name or Surname HARFMAN	
Inventor's Signature <i>Walter R. Harfman</i>			Date Nov 24, 2003
Residence: City WEDDINGTON	State NC	Country USA	Citizenship USA
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Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

ASSIGNMENT OF APPLICATION

Docket Number (Optional)

Whereas, I/We, WALTER R HARFMAN of WEDDINGTON, NC, hereafter referred to as applicant, have invented certain new and useful improvements in Low density rigid polyamide foam and method for production

☒ for which an application for a United States Patent was filed on Sept. 24, 2003

Application Number _____.

☐ for which an application for a United States Patent was executed on _____, and

Whereas, Hartmann Technology Inc of Weddington, NC here referred to "assignee" whose mailing address is 424 Amanda Dr Weddington NC 28104 is desirous of acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of one dollars (\$ 1.00), the receipt whereof is acknowledge, and other good and valuable consideration, I/We, the applicant(s), by these presents do sell, assign and transfer unto said assignee the full and exclusive right to the said invention in the United States and the entire rights, title and interest in and to any and all Patents which may be granted therefore in the United States. I/We hereby authorize and request the Director of the U.S. Patent and Trademark Office to issue said United States Patent to said assignee, of the entire right, title, and interest in and to the same, for his sole use and behoof; and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

Executed this 24th day of September, 20 03
at Lancaster, SC

Walter R Harfmann
Signature

State of SC

SS:

WALTER R HARFMAN
Printed Name/Registration No., if applicable

County of Lancaster

Before me personally appeared said Walter R. Harfmann

and acknowledged the foregoing instrument to be his free act and deed this 24th

day of September, 20 03.

Nicole Cauter

Seal

My Commission Expires
October 9, 2010

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below*.

☐ Total of _____ forms are submitted.